Application or Docket Number

		CLAIMS AS				÷ 0) · .		ALL EI	YTITY	~~	OTHER	
TC	OTAL CLAIMS		(Columi	(I)·	(Colu	mn 2)	TY			OR 1		
-			44	,			-	ATE	FEE		RATE	
FO	IR		NUMBER	FILED	NAWB	ER EXTRA	BA	SIC FEE	375.00	OR	BASIC FEE	75
TOTAL CHARGEABLE CLAIMS		44 minus 20=		24		· >	X\$ 9=		OR	X\$18=	14	
INDEPENDENT CLAIMS		4. minus 3 =		1	1		X42=		OR	X84=	8	
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				T.	140=		OR	+280=	-
* if	the difference	in column 1 is	less than z	ero, enter	"0" in c	column 2	L.,	OTAL			TOTAL	B
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7	773	(Column 1)		(Colur		(Column 3)	S	MALL	ENTITY	OR	SMALL	
A F		CLAIMS REMAINING AFTER		HIGH NUM PREVIO	EST BER OUSLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL	-,	RATE	A TI
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		(Column 1)		/Colu	mn 2)	(Column 3)	ADD	TOTAL IT. FEE			TOTAL ADDIT, FEE	
m		(Column 1) CLAIMS		(Columnia)	EST	(Column 3)	ADD		ADDI-		TOTAL ADDIT, FEE	
HENT B				HIGH NUM	IEST BER OUSLY	PRESENT EXTRA	ADD		ADDI- TIONAL FEE		TOTAL ADDIT. FEE	TI
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AMENDMENT B	Independent	CLAIMS REMAINING AFTÉR AMENDMENT	Minus	HIGH NUM PREVIO PAID	EST BER OUSLY FOR	PRESENT EXTRA	ADD	ATE	TIONAL	OR	RATE	TI
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